Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			4				Γ	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		Ī	BASIC FEE	355.00	OR	BASIC FEE	710.00	
то	TAL CHARGEAE	BLE CLAIMS	minus 20=		*			X\$ 9=		OR	X\$18=		
IND	EPENDENT CL	AIMS	mir	nus 3 =	*			X40=		OR	X80=		
MU	TIPLE DEPEN	DENT CLAIM P	RESENT				f	+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2						column 2	L	TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II									THAN				
_		(Column 1)	8 79 - 77	(Colu		(Column 3)		SMALLE		OR	SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	T OL AINA			X40=		OR	X80=		
	FIRST PRESE	NTATION OF M	OLTIPLE DEP	ENDEN	CLAIM			+135=		OR	+270=		
							L	TOTAL		OR	TOTAL		
		(Column 1)		(Colu	mn 2)	(Column 3)	,	ADDIT. FEE			ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	T OL A 114]=		X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						'	+135=		OR	+270=		
							L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)			ımn 2)	(Column 3)	_ ′			-			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	NTATION OF M	Minus	***	T CLAIM	<u> </u> =		X40=		OR	X80=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135=								OR	+270=			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FEE										TOTAL			
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN												
			(Column 1) (Col			mn 2) TYPE				OR	SMALL	
TOTAL CLAIMS								RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR		750.00
T	OTAL CHARGE	,35 minus 20= 1		* 5			X\$ 9=	135	OR.	X\$18=		
	DEPENDENT C		3 minus 3 = *					X42=		OR	X84=	
M	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+140=		OR	+280=	
*	f the difference	e in column 1 is	less than zero, enter "0" in column 2				TOTAL	0	b B	TOTAL		
	CLAIMS AS AMENDED - PART II							OTHER THA				
 		(Column 1)		(Colun	nn 2) (Column 3)		SMALL		ENTITY OR		SMALL ENTITY	
MENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	* 35	Minus	** 3	35	=		X\$ 9=		OR	X\$18=	j
AM	Independent	* STATION OF MI	Minus	*** 3	3	= [X42=		OR	X84=	T
┞	TINOT FRESE	INTATION OF MI	JLIPLE DE	PENDENT	CLAIM			+140=		OR	+280=	
							L	TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	
_		(Column 1)		(Colum		(Column 3)	•				ADDIT. I EE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	•
ME	Independent	*	Minus	***		=	ŀ	X42=			X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						 	742-		OR	A04=	
				•				+140=		OR	+280=	
								TOTAL DDIT. FEE .		OR	TOTAL ADDIT. FÉE	
_	II.	(Column 1)		(Colum		(Column 3)		,				
ENT C	and the same of th	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
AMENDMENT	Total	*	Minus	**		=	-	X\$ 9=	-		X\$18=	FEE
ME	Independent	*	Minus	***		=	-			OR		
lacksquare	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	ENDENT	CLAIM			X42=		OR	X84=	
	f the next to							+140=		OR	+280=	
**	If the "Highest Nur If the "Highest Nu	mn 1 is less than th mber Previously Pa mber Previously Pa ber Previously Paid	id For" IN THIS id For" IN THIS	S SPACE is S SPACE is	less that	20, enter "20."		TOTAL DDIT. FEE			TOTAL ADDIT. FEE	